



COMMONWEALTH of VIRGINIA

Virginia Racing Commission

5707 Huntsman Road, Suite 201-B

Richmond, Virginia 23250

(804) 966-7400

Fingerprint Reciprocity Confirmation

Date: _____:

The below listed licensee has applied for an owner, trainer, jockey, or driver license in Virginia under our licensing reciprocity provisions. They have stated that they are currently in good standing in your jurisdiction. Please confirm the information in the spaces provided below and mail to the address listed above.

Name of Licensee: _____

Date of Birth: _____ **License Type(s):** _____

Last Date Fingerprinted in your state: _____

Were the fingerprints processed in your jurisdiction through the FBI: ☐ YES ☐ NO

This person has a criminal history: ☐ YES ☐ NO

Prints were rejected: ☐ YES ☐ NO

Currently licensed in good standing: ☐ YES ☐ NO

If no, please explain:

Name of Certifier: _____ **Date:** _____

Signature of Certifier: _____ **State:** _____